

Due By April 24, 2009

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## Rhode Island Ethics Commission

## **2008 YEARLY FINANCIAL STATEMENT**

JOSEPH A MONTALBANO 10 GALE COURT

NORTH PROVIDENCE RI 02904-0000

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RHODE ISLAND
ETHICS COMMISSION

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ALL QUESTIONS REFER TO THE CALENDAR YEAR JANUARY 1, 2008 THROUGH DECEMBER 31, 2008 UNLESS OTHERWISE SPECIFIED.

PLEASE ANSWER <u>ALL QUESTIONS</u> AND WHERE YOUR ANSWER IS "NONE" OR "NOT APPLICABLE" SO STATE. ANSWERS SHOULD BE PRINTED OR TYPED, and additional sheets may be used if more space is needed. For clarification of any question, read instruction sheet.

**Note:** If you are a state or municipal official or employee who is required to file a Yearly Financial Statement, a failure to file the Statement is a violation of the law and may subject you to substantial penalties, including fines. If you received a 2008 Yearly Financial Statement in the mail but believe you did not hold a public position in 2008 or 2009 that requires such filing, you should contact the Ethics Commission (See Instruction Sheet for contact information).

Senator	Montalbano	Joseph	A.	
NAME OF OFFICIAL	(LAST)	(FIRST)	(INITIAL)	
10 Gale Court,	North Providence, Rhod	e Island 02904		
HOME ADDRESS	(STREET)	A ROM (CITY/TOWN)	(ZIP CODE)	
MAILING ADDRESS (If different for	om home address)			
List Public Position(s) y	ou hold and governmental uni	:		
Rhode Island St	ate Senate (District 1	7) North Pro	vidence/Pawtucket/Linco	1n
(PUBLIC POSITION)			(MUNICIPALITY, STATE OR REGIONAL)	
Municipal Court	Judge	Town of N	orth Providence	
(PUBLIC POSITION)			- (MUNICIPALITY, STATE OR REGIONAL)	
I was elected on 198 (date)	8 I was appointed on $\frac{19}{\text{(date)}}$	97 I was hire	d on (date)	
If you no longer hold a	oublic position, state date of te	rmination or resignation	N/A	
List elected office(s) for	which you were/are a candida	te in either calendar yea	ar 2008 or 2009 (Read instruction	on #
gan- I was	A CANOIDAK FOR ST	ale SEJATE Dis	TO:OF 17 13 2008.	

5. List the following: NAME OF SPOUSE

Linda M. Montalbano

6.	income during calendar year received. If employed by a s municipal agency for an am	oyer from which you, your spouse, or depender 2008. If self-employed, list any occupation from state or municipal agency, or if self-employed are ount of income in excess of \$250, list the date nent listed in #3, above, provides you with are. (Do Not List Amounts.)	which \$1,000 or more gross income was and services were rendered to a state or and nature of services rendered. If the
	NAME OF FAMILY MEMBER EMPLOYED	NAME AND ADDRESS OF EMPLOYER OR OCCUPATION	DATES AND NATURE OF SERVICES RENDERED
	See attached sheet		
7.	List the address or legal desc or dependent child had a fin-	cription of any real estate, other than your principa	al residence, in which you, your spouse,
	NAMES	NATURE OF INTEREST	ADDRESS OR DESCRIPTION
	Joseph A. Montalbano	Shareholder	959 Mineral Spring Avenue North Providence, RI 02904
8.		ame and address of the trustee of any trust, from received \$1,000 or more gross income. List ass	
	NAME OF TRUSTEE AND ADDRE	:SS:	
	NAME OF FAMILY MEMBER RECEIVING TRUST INCOME:	in the state of th	
	ASSETS:		
9.		of any business organization or other entity, whet child held a position as a director, officer, partner,	
Josep:	NAME OF FAMILY MEMBER h A. Montalbano	NAME AND ADDRESS OF BUSINESS Montalbano & Montalbano, Ltd. 959 Mineral Spring Avenue North Providence, RI 02904	Partner/Shareholder

Mortgage Guarantee & Title Co. 450 Veterans Memorial Parkway, #700 Joseph A. Montalbano East Providence, RI 02914 Joseph A. Montalbano Joseph A. Montalbano, Attorney at Law

959 Mineral Spring Avenue North Providence, RI 02904 Managing Attorney

Secretary

NAME OF FAMILY	NAME AND ADDRESS	DATE AND NATURE OF
MEMBER EMPLOYED	OF EMPLOYER OR OCCUPATION	SERVICES RENDERED:
MEMBER EMPLOTED	OF EMPLOYER OR OCCUPATION	2008
Togonh A Montalhana	Togonh A Montalhana	Law Firm
Joseph A. Montalbano	Joseph A. Montalbano	Law Firm
	Attorney at Law	
·	959 Mineral Spring Avenue	
T 1 A 3.6 / 11	North Providence, RI 02904	T1 C 1
Joseph A. Montalbano	Mortgage Guarantee & Title Co.	Legal Counsel
	450 Veterans Memorial Parkway, #700	
T 1 A 3.5 . 11	East Providence, RI 02914	G 1 ( 1T G 1 C (1 )
Joseph A. Montalbano	City of Central Falls	Conducted Tax Sale for the
	City Hall	City and related services
	Central Falls, RI 02863	
Joseph A. Montalbano	City of Pawtucket	Real estate related services
	City Hall	Tax Sales
	Pawtucket, RI 02860	
Joseph A. Montalbano	State of Rhode Island	Services as an Arbitrator in
	Superior Court	the Court-Annexed
	Licht Judicial Complex	Arbitration Program
	250 Benefit Street	
	Providence, RI 02903	
Joseph A. Montalbano	Saylesville Fire District	Tax sales
	PO Box 1	
	One Chapel Street	
	Lincoln, RI 02865	
Joseph A. Montalbano	State of Rhode Island	1989 to 2008
	State Senator	
Joseph A. Montalbano	Town of North Providence	Municipal Court Judge
	Town Hall	
•	North Providence, RI 02911	
Joseph A. Montalbano	Town of Warren	Conducted Tax Sale for the
	Town Hall	Town and related services
	Warren, RI 02885	Litigation to clear tax title
Joseph A. Montalbano	Pawtucket Water Supply Board	Tax sales
_	85 Branch Street	
	Pawtucket, RI 02860	
Joseph A. Montalbano	Town of Cumberland	Conducted Tax Sale for the
-	Town Hall	Town and related services
	Cumberland, RI 02864	Sewer Tax Sales
Joseph A. Montalbano	Town of Lincoln	Conducted Tax Sale for the
-	Town Hall	Town and related services
	Lincoln, RI 02865	
Joseph A. Montalbano	Pawtucket Housing Authority	Legal Counsel
*	214 Roosevelt Avenue	
	Pawtucket, RI 02860	
Joseph A. Montalbano	214 Roosevelt Avenue	Legal Counsel

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Joseph A. Montalbano	Providence Housing Authority	Legal Counsel
	100 Broad Street	
	Providence, RI 02903	
Joseph A. Montalbano	Valley Falls Fire District	Tax sales
	PO Box 207	
	Cumberland, RI 02864	
Stephen J. Montalbano	State of Rhode Island	Data Entry Aide
_	One Capitol Hill	
	Providence, RI 02903	

10.	List the name and address of any interested person, or business entity, that made total gifts or total contributions in excess of \$100 in cash or property during calendar year 2008 to you, your spouse, or dependent child. Certain gifts from relatives and certain campaign contributions are excluded. (See instruction #10)			
	NAME OF PERSON RECEIVING GIFT OR CONTRIBUTION	NAME AND ADDRESS OF PERSON OR EI MAKING GIFT OR CONTRIBUTION		
	None			
11.		y business in which you, your spouse, or dependent child indivownership interest, or a \$5,000 or greater ownership or investment		
	NAME OF FAMILY MEMBER	NAME AND ADDRESS OF BUSINES	SS	
:	See attached sheet			
12.		did business in excess of a total of \$250 in calendar year 2008 with ember or employee of the agency or exercise direct or legislative co		
	NAME AND ADDRESS OF BUSINESS	NAME OF AGENCY DATE AND NAT OF TRANSACT		
1	See attached sheet			
13.	If any business listed in #11, above agency, <b>AND</b> you are a member of agency, list the following:	e, was a business entity subject to direct regulation by a state or employee of the agency or exercise direct or legislative contro	municipal ol over the	
	NAME AND ADDRESS OF BUSIN	ESS NAME OF REGULATING AGEN	1CY	
	N/A			

NAME OF FAMILY MEMBER	NAME AND ADDRESS OF BUSINESS
Joseph A. Montalbano	Montalbano & Montalbano, Ltd.
	959 Mineral Spring Avenue
	North Providence, RI 02904
Joseph A. Montalbano	First American Title Insurance Co.
_	One First American Way
	Santa Ana, CA 92707
Joseph A. Montalbano	Fidelity Fund/UBS PaineWebber
	Providence, RI
	IRA, Retirement
Joseph A. Montalbano	Dorrance Street Financial-Wachovia Securities
	127 Dorrance Street, Fourth Floor
	Providence, RI 02903
	IRA, Retirement
Joseph A. Montalbano	Joseph A. Montalbano
	Attorney at Law
	959 Mineral Spring Avenue
	North Providence, RI 02904

NAME AND ADDRESS	NAME OF AGENCY	DATE AND NATURE OF TRANSACTION: 2008
Joseph A. Montalbano Attorney at Law 959 Mineral Spring Avenue North Providence, RI 02904	State of Rhode Island Superior Court	Services throughout 2008 in the Court-Annexed Arbitration Program
Joseph A. Montalbano Attorney at Law 959 Mineral Spring Avenue North Providence, RI 02904	City of Central Falls Tax Collector's Office	Tax Sales throughout 2008
Joseph A. Montalbano Attorney at Law 959 Mineral Spring Avenue North Providence, RI 02904	City of Pawtucket Tax Collector's Office	Tax Sales/Real Estate Related Services throughout 2008
Joseph A. Montalbano Attorney at Law 959 Mineral Spring Avenue North Providence, RI 02904	Town of Warren Tax Collector's Office	Tax Sales/Litigation to clear tax title throughout 2008
Joseph A. Montalbano Attorney at Law 959 Mineral Spring Avenue North Providence, RI 02904	Town of Cumberland Tax Collector's Office	Tax Sales/Sewer tax sale throughout 2008
Joseph A. Montalbano Attorney at Law 959 Mineral Spring Avenue North Providence, RI 02904	Saylesville Fire District PO Box 1 One Chapel Street Lincoln, RI 02865	Tax sales
Joseph A. Montalbano Attorney at Law 959 Mineral Spring Avenue North Providence, RI 02904	Town of Lincoln Tax Collector's Office	Tax Sales throughout 2008
Joseph A. Montalbano Attorney at Law 959 Mineral Spring Avenue North Providence, RI 02904	Pawtucket Housing Authority 214 Roosevelt Avenue Pawtucket, RI 02860	Legal services throughout 2008 as Legal Counsel to the Agency
Joseph A. Montalbano Attorney at Law 959 Mineral Spring Avenue North Providence, RI 02904	Pawtucket Water Supply Board 85 Branch Street Pawtucket, RI 02860	Tax sales
Joseph A. Montalbano Attorney at Law 959 Mineral Spring Avenue North Providence, RI 02904	Providence Housing Authority 100 Broad Street Providence, RI 02903	Legal services throughout 2008 as Legal Counsel to the Agency

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Joseph A. Montalbano	Valley Falls Fire District	Tax sales
Attorney at Law	PO Box 207	
959 Mineral Spring Avenue	Cumberland, RI 02864	
North Providence, RI 02904		
Joseph A. Montalbano	Town of North Providence	Municipal Court Judge
Attorney at Law	Municipal Court	throughout 2008
959 Mineral Spring Avenue	2000 Smith Street	
North Providence, RI 02904	North Providence, RI 02911	

14. If you, your spouse, or dependent child individually or collectively acquired or divested a 10% ownership interest or a \$5,000 or greater ownership or investment interest in a business after January 1, 2009 and before the date you file this statement **AND** if said business was regulated by a state or municipal agency of which you are an employee or a member, or over which you exercise direct or legislative authority, list the following:

NAME AND ADDRESS OF BUSINESS

DESCRIPTION OF INTEREST (NOT AMOUNT)
AND DATE ACQUIRED AND/OR DIVESTED

N/A

NAME OF REGULATING AGENCY

**HOW REGULATED** 

15. If you, your spouse, or dependent child individually or collectively acquired or divested a 10% ownership interest or a \$5,000 or greater ownership or investment interest in a business after January 1, 2009 and before the date you file this statement, which did business in excess of \$250 with a state or municipal agency of which you are an employee or a member, or over which you exercise direct or legislative authority, list the following:

NAME AND ADDRESS OF BUSINESS DESCRIPTION OF INTEREST DATE ACQUIRED AND/OR DIVESTED (DO NOT INCLUDE AMOUNT) NAME OF STATE OR MUNICIPAL AGENCY

N/A

16. If you, your spouse or dependent child were indebted in an amount in excess of \$1,000 to any person, business entity or other organization other than (i) any person related to you, your spouse or dependent child at any time within the third degree of consanguinity, or (ii) a financial institution regulated by any state or by the United States where such indebtedness is secured solely by a mortgage of record on real property used exclusively as your principal residence, or (iii) any indebtedness arising from transactions involving credit cards, please list the following:

NAME AND ADDRESS OF DEBTOR

NAME AND ADDRESS OF LENDER

N/A

I certify under penalty of perjury, that this Financial Statement is a complete and accurate response to the questions presented as to the financial information and interests during the year 2008 of myself, my spouse, and my dependent children. I acknowledge that I may request an advisory opinion from the Ethics Commission as to my conduct under the Code of Ethics. I understand that a copy of the Code of Ethics will be provided to me at no cost upon request by contacting the Ethics Commission.

	God a C
State of Rhode Island County of Providence	SIGNATURE
Subscribed and sworn to before me at Providence	thisday of <u>April</u> 200 <u>9</u>
My Commission 6-19-09 John W. 1900 Atailbano 6-19-09	SIGNATURE OF NOTARY PUBLIC
Neton Public	Olota tradizioni tradizioni anni

THE STATEMENT WILL BE RETURNED IF IT IS NOT SIGNED AND NOTARIZED AND IF ANY
State of Rhode Island QUESTION IS NOT ANSWERED.

My Comm. Exp. 6-19-2009